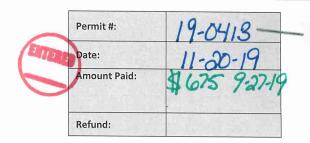
SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

SEP 262019

Bayfield Co. Zoning Dept.



INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Depart

DO NOT START CONS	TRUCTIO	N UNTIL A	ALL PERMITS H	IAVE BEEN ISSUE	D ТО АРР	LICANT.	FILL OUT IN INK (NO PENCIL)								
TYPE OF PERMIT F	REQUEST	ΓED →	☐ LAN	D USE SA	ANITAR		CONDITION	AL USE SPECIAL	USE	☐ B.O.A.	□ от	HER			
Owner's Name:	17.) /				ng Address:	10 '	//State/Zip:			ephone:				
Address of Property	IKra	bek			312	17 Mont DU	Lac Pr. S	esperial, W	2488	30					
43160 R						State/Zip:	I 5482) 1		1	l Phone: P – 2 <i>l</i> /	o-6577			
Contractor	/ \ / /					ractor Phone:	Plumber:								
Randy Blo Authorized Agent: (rk	Buil	dess		715-	715-558-1184 Living Water Plumbing 7558 1399									
		ning Appli	cation on behal	f of Owner(s))	Agen	t Phone:	Agent Mailing A	e/Zip):							
Kandy B	jork				715	t2630 U.S.	ddress (include City/State Hwy 63 Cable, 1	N 5	4821	Yes 🗆	No				
PROJECT LOCATION	Legal	Descrip	tion: (Use T	ax Statement)	Tax II	0 (66)		* *	Reco	rded Documer 219 R	t: (Showi	ng Ownership)			
1/4,	1	./4	Gov't Lot	Lot(s)	37	Vol & Page CSN 2 17+18	/I Doc# Lot	(s) No. Block(s) No.	Subd	ivision:					
Section <u>13</u>	, Tow	nship _	<u>43</u> n, r	ange	w	Town of:	aKagon		Lot Si	005g.ft.	Acreage	56 t			
	Creel			n 300 feet of Riv		eam (incl. Intermittent)	0	ucture is from Shorelin	ne : feet	Is Property	in	Are Wetlands			
X Shoreland →	-			1000 feet of L	ake, Por		Distance Str	ucture is from Shorelin		Floodplain Zo	one?	Present? Ves No			
☐ Non-Shoreland					y	- vo.itiliue	-		icet	XIVO		2/140			
Value at Time of Completion							# of	W	hat Typ	ne of		Type of			
* include		Proje	ct	# of Stori	ies	Foundation	bedrooms in			y System		Water			
donated time & material							structure	Is on	the property?			property			
	-		ruction	☐ 1-Story		Basement	□ 1	☐ Municipal/City				☐ City			
\$ 000			Alteration	☐ 1-Story +	- Loft	X Foundation		ary Specify Type: KW							
225,000		version	n xisting bldg)	2-Story			□ 3	Sanitary (Exists			17				
	California (1944)		ness on			Use	□ None		it) or Uaulted (min 200 gallon) e (w/service contract)						
	Pro	perty				☐ Year Round	= 1.01.0 = 1.01.00 (W/ Scivic					ise contract;			
-								□ None							
Existing Structure	e: (if per	rmit bei	ng applied fo	r is relevant to	it)	Length: 44.3'	,	Width: 38'-3"		Heigh	: /*	7'			
Proposed Constr	uction:	9. N				Length: 44'		Width: 38'		Height		<i>(1)</i>			
Proposed Us		1			(T), 164	December 1 Charles	V 7.5-1	Cartill Live St.				Square			
Proposed os	e					Proposed Structu	re		D	imensions		Footage			
ъ		□ >		Structure (fir. e (i.e. cabin, h		sture on property)			1201	X 3" X 44' -3 ")	1692+			
 		7	Residence	with Loft	Titling	silack, etc.)			(38			1672			
Residential	Use			with a Porc	ch				(X) /	0 / 1			
				with (2 nd) F	Porch				(Х)				
-				with a Decl					(Х)				
☐ Commercial	l I Isa			with (2 nd) [(X) -				
Commercial	036		Punkhou	with Attacl				0.6 1 6 11111	()	4.			
	-							& food prep facilities)	1	X)	9			
	-		Addition	Alteration (specify)				1	X)				
☐ Municipal U	Jse			/ Building (s					(X)				
						Alteration (specify)			(х)				
	}								,						
			Special U	se: (explain)					(X)				
									(X)				
						TIME CONSTRUCTION			(Х	1				
I (we) declare that this a	application (including a	iny accompanyin	g information) has be	een examir	ned by me (us) and to the be	est of my (our) know	IIT WILL RESULT IN PENALT rledge and belief it is true, corre	ect and cou	mplete. I (we) ack	nowledge t	hat I (we) am			
(are) responsible for the	detail and a y relying on	accuracy o this infor	f all information mation I (we) am	I (we) am (are) provid (are) providing in or	ding and th	at it will be relied upon by	Bayfield County in c	letermining whether to issue a larged with administering coun	permit 1/	we) further accent	liability wh	nich may be a			

(If there are Multiple Owners) sted on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent:

chalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent:

Address to send permit 42630 U.S. HWY 63

Copy of Tax Statement

Date 9-25-2019

Attach

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL (1) Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan (2)Show Location of (*): (3)(*) **Driveway** and (*) **Frontage Road** (Name Frontage Road) (4)Show: All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show: (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6) Show any (*): Show any (*): (7)(*) Wetlands; or (*) Slopes over 20% Garden Lake

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measureme	nt	Description	Measureme	nt
Setback from the Centerline of Platted Road	45	Feet	Setback from the Lake (ordinary high-water mark)	21	Feet
Setback from the Established Right-of-Way	-	Feet	Setback from the River, Stream, Creek	MA	Feet
		-	Setback from the Bank or Bluff	NA	Feet
Setback from the North Lot Line	64	Feet		1000	
Setback from the South Lot Line	16	Feet	Setback from Wetland	75+	Feet
Setback from the West Lot Line	120	Feet	20% Slope Area on the property	☐ Yes 🗶	
Setback from the East Lot Line	Lake	Feet	Elevation of Floodplain	1397.0	
Setback to Septic Tank or Holding Tank	0.6				*
Setback to Drain Field	1100	Feet	Setback to Well	NA	Feet
	NA	Feet		Under Cabiy	i i
Setback to Privy (Portable, Composting)	NA	Feet	oundary line from which the sethack must be measured must be visible from o		*

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

The local Town, Village, City, State or Federal agencies may also require permits.													
Issuance Information (County Use Only)	Sanitary Number:	17-19-158S	# of bedrooms:	Sanitary Date: 7/22/7/2									
Permit Denied (Date):	Reason for Denial:		Philosophia and the state of										
Permit #: 19-0413	Permit Date: 11-20	5-19											
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Record □ Yes □ Yes	d) <u>363-372</u> \square No ous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required ☐ Yes ☐ No Affidavit Attached ☐ Yes ☐ No									
Granted by Variance (B.O.A.) ☐ Yes ✓ No Case #:		Previously Granted by See No	Variance (B.O.A.)	#:									
Was Proposed Building Site Delineated Yes No		Were Property Lines Represented by Owner Was Property Surveyed ✓ Yes □ No											
Inspection Record: OR'd combining the 2 le	egs of horse shoe	into 1-setbaci	k further from	Zoning District (R-/) Lakes Classification ()									
Date of Inspection: $10/9/19$	Inspected by:			Date of Re-Inspection:									
Condition(s): Town, Committee or Board Conditions Attached? Yes No - (If No they need to be attached.) Condition: Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained. Signature of Inspector: Alaca Date of Approval: 1/5/19													
Hold For Sanitary: Hold For TBA:	Hold For Affid	lavit: 🗌	Hold For Fees: 🗌 🔃	/ / / /									

City, Village, State or Federal May Also Be Required

AND USE - X **SANITARY - 19-158S** SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0413			Issue	Issued To: Larry Pulkrabek / Randy Bjork, Agent										
Location:	_	1/4	of	_	1/4	Section	13	Township	43	N.	Range	6	W.	Town of	Namakagon
Gov't Lot				4	Blo	ock Subdivision					CSM# 37				
								.3' x 44.3') =				(38'	x 44')	= 1,672 s	q. ft.;]
Condition							_								any erosion or

onto neignboring prope obtained. No patio or screen porch to be added to site.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

November 20, 2019

Date

SUBMI COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138



APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) NOV 12 2019



Permit #: Amount Paid:

Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Refund:

DO NOT START CON	ISTRUCTIO	N UNTIL A	ALL PERMITS F	HAVE B	EEN ISSUE	ED TO AP	PLICANT.	Origi	inal Ap	plication <u>I</u>	MUST I	e subm	itted [4]	FIL	LOUT IN INK	NO PE	NCIL)
TYPE OF PERMIT	REQUEST	ΓED→	X	LAND	USE			PRIV	Y 🗆	CONDITI	IONAL	USE [SPECIA	L USE	☐ B.O.A.	□ OTHE	R
Owner's Name:		0					ling Addre		Ω	1		/State/Z		r-	0-01	Teleph	
Address of Property	au1	19	5,10			68.	7-5he		Ko	વડ	W.	Ime	He, I	L (Q	0091	715	5170050
30995 Co	rytur	High	way 1	M			Clav	n La	ke	wJ	E 3	545	17			Cell Ph	one:
Contractor:		J	,			600000000000000000000000000000000000000	tractor Ph			Plumber	r:					Plumbe	er Phone:
Miller CI Authorized Agent:							727 ent Phone:			Agent M	lailing A	ddress	include City	/State	/7in)•	Writte	n
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																Attach Yes	ed □ No
PROJECT	Logal	Docerin	tion: (Use T	av Ctal	tomont)		Tax ID#	27							rded Document:	(Showing	Ownership)
LOCATION	Legal	Descrip	tion. (use i	dx Stal	tement			37	56	8				_10	NTR	561	634
1/4,		1/4	Gov't Lot		Lot(s)	CSM	Vol &		CSM D		Lot(s)	#	Block #	Subd	livision:		
0=					7	1991			199		10,1	τ'		l at C	•		
Section 25	, Tow	nship 🚺	43N N, R	lange (R05	w		own of:	Scw	naka	igon	2		Lot S	ize	Acre	6.180
	∏ ls l	Property	/Land withi	n 300	feet of R	liver St	ream /incl						m Shorelir	ne ·	Is your Prope	ertv	
v	Cree		dward side				yescor							feet	in Floodpla		Are Wetlands Present?
X Shoreland —	XIS F	Property	/Land withi	n 1000) feet of	Lake, Po	ond or Flo	wage	1	Distance S			m Shorelir	ne :	Zone?		X Yes
						If	yescor	tinue -	▶ .		39.	, Q		feet	K No		□ No
☐ Non-Shoreland	t		-		-												
Value at Time	NAME OF A		Talenta de	12.00						7.1.10							
of Completion					Project		Pro	ect		Total #					ype of ry System(s)		Type of Water
* include donated time		Projec	t	1000	of Stori	ALCOHOL: N	Found								operty or		on
& material				# of Stories Touridati						proper	ty		Will be	on th	e property?		property
	☐ New	Constr	uction		1-Story		Base	ment		□ 1			nicipal/Cit				☐ City
	☐ Addi	tion/Al	teration		☐ 1-Story + ☐ Found:			dation	ation 🗆 2			☐ (New) Sanitary Specify Type:					□ Well
\$									-		- -	Sani	tary (Fxis	ts) Sr	pecify Type:		
	☐ Conv	ersion/			2-Story		Slab 3										
			sting bldg)											□ Vaulted (min 200 gallon)			
	Run		ess on		Use ☐ Year Round					□ None □ Portable (w/se					contract)	_	
	Prop	erty				- 1	_ Year	Kouna	18173		1 1	Com	ipost roll	eτ			
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If you recently purchased the property send your Recorded Deed

ch your Property (regardless of what you are applying for)

Filt Out in Ink - NO PENCIL

Proposed Construction Show Location of: (1) North (N) on Plot Plan Show / Indicate: (2)

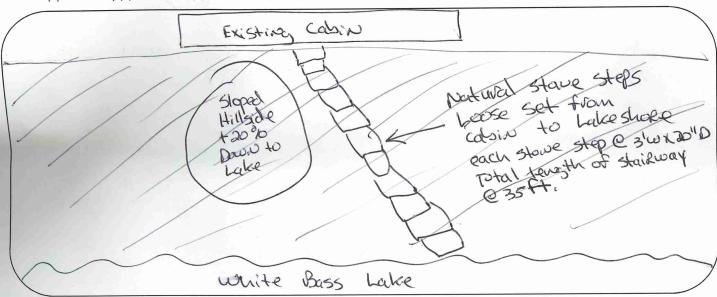
Show Location of (*): (3)

(*) Driveway and (*) Frontage Road (Name Frontage Road)

(4)Show: All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5)Show: (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% (6)Show any (*):

(7) Show any (*):



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurem	ent		Description	Measureme	nt
Setback from the Centerline of Platted Road	2000	Feet		Setback from the Lake (ordinary high-water mark)	0	Feet
Setback from the Established Right-of-Way	2000	Feet		Setback from the River, Stream, Creek	-	Feet
			I XII	Setback from the Bank or Bluff	0	Feet
Setback from the North Lot Line	400	Feet				
Setback from the South Lot Line	200	Feet		Setback from Wetland	40	Feet
Setback from the West Lot Line	0	Feet		20% Slope Area on the property	X Yes □ I	No
Setback from the East Lot Line	2000	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	5,00	Feet		Setback to Well	100	Feet
Setback to Drain Field	600	Feet				
Setback to Privy (Portable, Composting)	_	Feet				

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:							
Permit Denied (Date):	Reason for Denial:										
Permit#: 19-0415	Permit Date: 11-2	Permit Date: 11-21-19									
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recor Yes (Fused/Contigue) Yes	ous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached Service Yes No							
Granted by Variance (B.O.A.) ☐ Yes ✓ No Case #:		Previously Granted b	y Variance (B.O.A.) Case	e #:							
		Were Property Lines Represented by Owner Was Property Surveyed Yes Yes									
Inspection Record:				Zoning District $(R-1)$ Lakes Classification (Z)							
Date of Inspection:	Inspected by:	Date of Re-Inspection:									
Condition(s): Town, Committee or Board Conditions Atta	Condition: Constru practices shall be erosion or sedim	uction site best mana implemented to prev nentation onto neig	gement Remove any ghboring	Stairway East of Owelling							
Signature of Inspector:	shall be obtained.	nds. Necessary UDC	5 permit	Date of Approval: 1/20/19							
Hold For Sanitary: Hold For TBA:	IIVIN I VI AIII	iuavit. 🗆	noid For Fees: 🗌								

After-the-Fact

SANITARY –

SIGN –

SPECIAL –

CONDITIONAL –

BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-	-0415	5		Issue	d To: Pa	ul & .	Jane Pasin								
Location:	-	1/4	of	_	1/4	Section	25	Township	43	N.	Range	5	W.	Town of	Namakagon	
Gov't Lot				Lot	1	Blo	ock	Subdivision						CSM# 1	1991	

For: Residential Other: [Stairs to the Lake (3' x 35') = 105 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained. Remove stairway East of dwelling.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

November 21, 2019

Date